## PATENT APPLICATION FEE DETERMINATION RECORD

**Application or Docket Number** 

Effective December 8, 2004

ENGOLIVO EGGGINDONO, 2004									10	10 373938			
CLAIMS AS FILED - PART I								SMALL ENT	TITY	OR	OTHER THAN SMALL ENTITY		
	ALATIONIAL		(Column	1)	(	(Column 2)				7 .	SWALL ENTITY		
0.8	. NATIONAL	STAGE FEES	·			· · · · · · · · · · · · · · · · · · ·		RATE	FEE		RATE	FEE	
BASIC FEE			SMALL ENT. = \$ 150			SE ENT. = \$ 300		BASIC FEE	150	OR	BASIC FEE		
EXAMINATION FEE			Satisfies PCT An (4) = \$50 /	\$ 100		her situations = 100 / \$ 200		EXAM. FEE	100	. 4	EXAM. FEE	·	
SEARCH FEE			U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400			her situations = 250 / \$ 500		SEARCH FEE	30		SEARCH FEE		
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 ≐ .		X \$ 125 =	P		X \$ 250 =		
тот	AL CHARGEA	BLE CLAIMS	<b>ට</b> ∂ minus 20 =		*			X \$ 25 =		OR	X \$ 50 =		
IND	EPENDENT CL	AIMS	j mi	nus 3 =	*			X \$ 100 =		OR	X \$ 200 =		
MUL	TIPLE DEPEN	IDENT CLAIM PR	ESENT					+ \$ 180 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2						•	TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE	
	Total	*	Minus 🔑	**	¬	=		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
*								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	ın 2)	(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA	B	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	·	
	Independent	*	Minus	***		<b>a</b>		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
FORM PTO-875 (Pay 02/2005)													